

HAWAII STATE ETHICS COMMISSION

1001 BISHOP STREET, ASB TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: 587-0460 FAX: 587-0470 email: ethics@hawaiiethics.org

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LOBBYIST REGISTRATION FORM (Type or Print Clearly)

PART I LOBBYIST				
NAME (Last)	(First)	(Middle)	TELEPHONE	
Yokota	Blane		546-5466	
MAILING ADDRESS (Street)			FAX	
1177 Bishop Street			546-8500	
(City)	(State)		(Zip Code)	
Honolulu	Hawaii		96813	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE	
Hawaiian Telcom, Inc.			546-5466	
MAILING ADDRESS (Street)	4 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		FAX	
1177 Bishop Street			546-8500	
(City)	(State)		(Zip Code)	
Honolulu	Hawaii		96813	

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU L	TELEPHONE		
Hawaiian Telcom, Inc.	546-5466		
MAILING ADDRESS (Street)	FAX		
1177 Bishop Street		546-8500	
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96813	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE	
JoAnn Yosemori		546-3868	
MAILING ADDRESS (Street)		FAX	
1177 Bishop Street		546-8500	
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96813	

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PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY						
Agricultu	ure	Education	☐ Human Services	Science, Technology & Economic Development		
Commun Public U	nications & Itilities	Government Operation & Finance	Intergovernmental Relations, International Affairs	☐ Tourism & Recreation		
Consum Comme	ner Protection & rce	☐ Hawaiian Affairs	✓ Labor & Employment	Transportation		
Culture,	Arts, Historic ation	☐ Health	Planning, Land & Water Use Management	Other: (indicate below)		
Ecology Environi	, Energy mental Protection	☐ Housing	Public Safety & Corrections			
PART IV CERTIFICATION OF LOBBYIST						
I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.						
	Bland.	Yht		1-3-07		
		(Signature of Lobbyist)		(Date)		
PART V	AUTHORIZATIO	N TO LOBBY				
NAME		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED				
Michael	S. Ruley		Chief Executive Officer			
NAME OF C	ORGANIZATION (if app	olicable)		TELEPHONE		
Hawaiiar	n Telcom, Inc.			546-3868		
MAILING AI	DDRESS (Street)			FAX		
1177 Bis	shop Street			546-8500		
(City	<u>')</u>	(State)		(Zip Code)		
Honolulu	ı ·	Hawaii		96813		
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.						
	-y	John Ruley		1-03-07		
	(Signature of Autl	norizing Officer or Person Represe	ented)	(Date)		

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